FORM D

SEC Mail Mail Processing Section UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

JAN 02 2008

Washington, DC

106

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL

OMB Number: 3235-0076

Expires: April 30,2008

Estimated average burden
hours per response.....16.00

SEC USE ONLY							
Prefix		Serial					
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1							

Name of Offering (check if this is an amendment and name has changed, and indicate change.) EMA VIETNAM FUND, LP Limited Partnership Interests	<u> </u>
Filing Under (Check box(es) that apply): Rule 504 Rule 505 X Rule 506 Section 4(6) Type of Filing: New Filing Amendment	UI.OE
A. BASIC IDENTIFICATION DATA	1 IAANN AATAL DANN AATAL DERN AATAL DERN ARALE HOLDER
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) EMA Vietnam Fund, LP	08020242
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
260 Bear Hill Road, Suite 302, Waltham, MA 02451	781-209-1177 x102
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) same	Telephone Number (Including Area Code)
Brief Description of Business To achieve capital appreciation and provide superior long-term returns to investors equity investments in reasonably priced public and private Vietnamese companies	through seeking to make long-term and projects with sustainable high growth
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	please specify): PROCESSED JAN 1 0 2008
Month Year Actual or Estimated Date of Incorporation or Organization: OG OTT X Actual Estin Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada: FN for other foreign jurisdiction)	nated THOMSON

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC II	DENTIFICATION DATA		
2. Enter the information re	equested for the fo	llowing:			
• Each promoter of	the issuer, if the is:	suer has been organized	within the past five years;		
 Each beneficial ow 	ner having the pow	ver to vote or dispose, or o	direct the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
 Each executive off 	ficer and director o	of corporate issuers and o	of corporate general and ma	inaging partners of	partnership issuers; and
Each general and a	managing partner o	of partnership issuers.			
Check Box(es) that Apply:	Promoter	Reneficial Owner	Executive Officer	Director	▼ General and/or Managing Partner
Full Name (Last name first,	if individual)				
,	,				
EMA VIETNAM GP, Business or Residence Addre		Street, City, State, Zip (Code)		
260 Bear Hill Road,			,		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Addre	ess (Number and	Street, City, State, Zip (Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				· · · · · · · · · · · · · · · · · · ·
Business or Residence Addre	ess (Number and	Street, City, State, Zip (Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)			,	
Business or Residence Addre	ess (Number and	Street, City, State, Zip (Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)			=	
Business or Residence Addre	ess (Number and	Street, City, State, Zip (Code)		
Check Box(es) that Apply:	Promoter	Buneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	• • • • • • • • • • • • • • • • • • • •			
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	Code)		
	(Use bla	nk sheet or conv and us	e additional copies of this	theet as necessary)	1

					B. U	NFORMAT	ON ABOU	T OFFERI	NG				
,	Han the	icenar ast	l or do-a-!	ioan :	stand to so	11 to non -	oorodii-1!	muacia	thic offer	m a 9		Yes	No rea
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									X			
2.	What is	the minim	um investo					•				¢ 1 ∩	00,000*
۷.	. What is the minimum investment that will be accepted from any individual?									Yes	No		
3.	3. Does the offering permit joint ownership of a single unit?											X	
4.	commis If a pers	sion or sim on to be lis	ilar remune ted is an ass	ration for s sociated pe	olicitation rson or ago	of purchase ent of a brok	ers in conne er or deale	ection with r registered	sales of sec I with the S	curities in t EC and/or	irectl, any he offering. with a state		
			ame of the b , you may s							ciated pers	ons of such		
Ful			first, if indi										
	n/a												
Bus	siness or	Residence	Address (N	lumber and	Street, C	ity, State, Z	ip Code)						
Nar	ne of Ass	sociated Br	oker or De	aler		• • •							
					· · · · · · · · · · · · · · · · · · ·								
Sta			Listed Has										
	(Check	"All States	or check	individual	States)							☐ A1	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	ĪN	lA	KS	<u>KY</u> '	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	N)	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX.	[UT]	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)						
Nar	ne of As	sociated Br	oker or De	aler									
Sta			Listed Has										
	(Check	"All States	or check	individual	States)		•••••		***************************************	***************************************	***************************************	☐ Al	1 States
	AL	ĀK	AZ	AR	CA.	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	ĪĀ	KS	KY)	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH		NM	NY	NC	ND	OH TOTAL	OK	OR	PA
	RI	SC	SD	TN	TX]	UT	[VT]	VA	WA	WV	WI	WY	PR
Ful	l Name (Last name	first, if ind	ividual)	`		••					-	
Bus	siness or	Residence	Address (?	Number an	d Street, C	City, State, 2	Zip Code)						
Nar	ne of Ass	sociated Br	oker or De	aler	,								
<u></u>		dal D	71. 111			0.12.14							
Sta			Listed Has " or check						***************************************	***********		□ AI	I States
	AL IL	AK IN	AZ IA	AR KS	CA KY	LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
	MT	NE	NV	NH	NJ]	NM	NY	NC NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	$\overline{\mathbb{WV}}$	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

^{*} May be modified by the General Partner at its sole discretion9

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

١.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity		
	Common Preferred		Ψ
	Convertible Securities (including warrants)		\$
	Partnership Interests		
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	\$ (D,445,572
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ <u>5,449,372</u>
	Non-accredited Investors	0	s <u> </u>
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	,	\$
	Regulation A	•	\$
	Rule 504		\$
	Total		\$ O
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	🔀	s 12,000
	Accounting Fees	-	\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	_	\$ \(12,000

^{*} The amount currently offered is \$100,000,000 however the Issuer is permitted to extend or expand the aggregate offering price and is allowing for that possibility here.

C. OFFERING PRICE, NUMI	BER OF INVESTORS, EXPENSES AND USE OF F	ROCEEDS	
b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$ <u>9</u> 9,988,000
5. Indicate below the amount of the adjusted gross pro- each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
		Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees	[\$. 🗆 s
Purchase of real estate	[\$
Purchase, rental or leasing and installatior, of macand equipment	hinery [\$. 🗆 \$
Construction or leasing of plant buildings and faci	ilities[\$	
Acquisition of other businesses (including the value offering that may be used in exchange for the assessuer pursuant to a merger)	ts or securities of another	¬\$	□\$
Repayment of indebtedness			
Working capital			
Other (specify):			
		\$. 🗆 \$
Column Totals	[\$ <u>0</u> 0	x \$ 5,449,372
Total Payments Listed (column totals added)		⋈ \$ <u>α</u>	5,449,372
	D. FEDERAL SIGNATURE		-
The issuer has duly caused this notice to be signed by the signature constitutes an undertaking by the issuer to furthe information furnished by the issuer to any non-accordance.	undersigned duly authorized person. If this notice nish to the U.S. Securities and Exchange Commis	sion, upon writte	
Issuer (Print or Type) EMA VIETNAM FUND, LP By: EMA VIETNAM GP, LLC Its: General Partner	Signature Li P. Th	Date December	12, 2007
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Richard P. Kosowsky	Manager of General Partner		

- ATTENTION -

Items 1, 2, 3 and 4 below have been deleted pursuant to the National Securities Market Improvement Act of 1996

		E. STATE SIGNATURE
	•	esently subject to any of the disqualification Yes No
	See	Appendix, Column 5, for state response:
	signed issuer hereby undertakes to the 239.500) at such times as require	furnish to any state administrator of any state in which this notice is filed a notice on Formed by state law:
3. The under issuer to o	· ·	furnish to the state administrators, upon written request, information furnished by the
limited Of	fering Exemption (UEOE) of the st	sucr is familiar with the conditions that must be satisfied to be entitled to the Uniform tate in which this notice is filed and understands that the issuer claiming the availability ring that these conditions have been satisfied.
The issuer has read t luly authorized per		ents to be true and has duly caused this notice to be signed on its behalf by the undersigned
ssuer (Print or Typ By: EMA VIETNA	e) EMA VIETNAM Fund, LP	Signature
Its: General	•	December 12, 2007
Name (Print or Typ		Title (Print or Type)
Richard P. K	osowsky	Manager of General Partner

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to non-a investor	2 to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		χ	imited Partnership Inter- \$100,000,000	ests 1	\$500,000				х
СО	·	х	Limited Partnership Inter \$100,000,000	ests 1	\$250,000				Х
СТ		х	Limited Partnership Inter \$100,000,000	ests 1	\$200,000				Х
DE		X L	mited Partnership Interes		\$3,749,372				х
DC						"			
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MD									
МА									
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MN									
MS									

APPENDIX

1		2	3		4				
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	Finvestor and rchased in State C-Item 2)		under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
ок									
OR									
PA									
RI									
sc									
SD									
TN									
TX	-	χ ^ι	mited Partnership Inter \$100,000,000	ests 1	\$750,000				х
UT									
VT									
VA									
WA									
wv									
WI									

			······························	APP	ENDIX									
l		2	3		4									
	to non-a	I to sell accredited as in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					amount purchased in State waiver g		under (if you and explored waive		ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No					
WY			-											
PR														